PATENT APPLICATION FEE DETERMINATION RECO						09/82578				
Effective October 1, 2000						999		世		
CLAIMS AS FILED - PART I (Column 1) (Column 2)					MALLE	NTITY		OTHER	THAN	
TOTAL CLAIMS	Lie	(C دهای	olumn 2)	ا 11	YPE [<u> </u>	OR	SMALL		
FOR		51 51		F	RATE	FEE		RATE	FEE	
	TNUMBER		JMBER EXTRA	В	ASIC FEE	355.00	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS		nus 20= 1			X\$ 9=		OR	X\$18=	450 2	
INDEPENDENT CLAIMS	<u> </u>	inus 3 =			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2					TOTAL		OR	TOTAL	1/600	
CLAIMS AS AMENDED - PART II 8 -4-C					/		J	OTHER	THAN	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST					SMALL	ENTITY	OR	SMALL		
REMAINING AFTER AMENDMENT Total Independent Total Independent		NUMBER PREVIOUSL PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total ·30	Minus	-73	42 XI		X\$ 9=		OR	X\$18=		
Independent FIRST PRESENTATION OF M	Minus	PENDENT CL	3 9		X40=		OR	X80=		
T. W.O. F. FLOEDVIA HOLD OF W	OLIIPLE DE	PENDENT CL	AllWi		+135=		OR	+270=		
	. 1	+_1:1-	05	<u>L</u>	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	\	
(Column 1)		(Column 2	(Column 3)		DII. FCC (<u> </u>	'. ق	ADDII. PEEL	<u> </u>	
CLAIMS REMAINING		HIGHEST NUMBER	PRESENT			ADDI-			ADDI-	
AFTER AMENDMENT		PREVIOUSL PAID FOR			RATE	TIONAL FEE		RATE	TIONAL FEE	
REMAINING AFTER AMENDMENT Total Independent Total	Minus	-405	= /		X\$ 9=		OR	X\$18=		
Independent FIRST PRESENTATION OF M	Minus ULTIPLE DE	PENDENT CLA	= 1		X40=		OR	X80=		
				+	135=		OR	+270=		
,				ADI	TOTAL DIT. FEE		OR ,	TOTAL ODIT. FEE		
(Column 1)	Province Manufacture	(Column 2)	(Column 3)							
Total • Independent •		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total •	Minus	**	=	×	(\$ 9=		OR	X\$18=	,	
Independent ·	Minus	***	=		K40=		ŀ	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.					135=		OR 🏻	+270=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."					TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE		
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										